

CLAIMS ONLY								Application Number 101650086	Filing Date				
								Applicant(s)					
								* May be used for additional claims or amendments					
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT			Indep	Depend	Indep	Depend	Indep	Depend
	Indep	Depend	Indep	Depend	Indep	Depend							
1								51					
2								52					
3								53					
4								54					
5								55					
6								56					
7								57					
8								58					
9								59					
10		2						60					
11								61					
12								62					
13								63					
14								64					
15								65					
16								66					
17								67					
18								68					
19								69					
20			2					70					
21		2						71					
22								72					
23								73					
24			2					74					
25								75					
26								76					
27								77					
28								78					
29								79					
30								80					
31	1							81					
32	1							82					
33		1						83					
34		1						84					
35								85					
36								86					
37								87					
38								88					
39		1						89					
40			1					90					
41								91					
42								92					
43								93					
44								94					
45								95					
46								96					
47								97					
48								98					
49								99					
50	1							100					
Total Indep								Total Indep	8				
Total Depend								Total Depend	16				
Total Claims								Total Claims	84				